

3904 Lonas Drive
Knoxville, TN 37909
(865) 251-1800

South College

U.S. Citizen Yes No

APPLICATION FOR ADMISSION

Please print or type and answer each question carefully.

Full Legal Name _____ Home Phone _____

Address _____ City & State _____ ZIP Code _____

*Age _____ *Date of Birth _____ Email Address _____

*Social Security Number _____ *Race _____ *Sex: Male Female

Employed by _____ Business Phone _____

Spouse's Name _____ Address _____ Phone No _____ SS# _____ Employer _____

Father, Stepfather or Guardian _____ Address _____ Phone No _____ Employer _____

Mother, Stepmother or Guardian _____ Address _____ Phone No _____ Employer _____

TWO REFERENCES FROM HOME LOCALITY OTHER THAN RELATIVES OR STUDENTS

Name _____ Address _____ Phone _____ No _____ Employer _____

Name _____ Address _____ Phone _____ No _____ Employer _____

ONE RELATIVE OTHER THAN PARENTS WHO WILL ALWAYS KNOW YOUR ADDRESS

Name _____ Address _____ Phone _____ No _____ Employer _____

PROGRAM OF STUDY YOU PLAN TO PURSUE _____
QUARTER ENTERING: Fall Winter Spring Summer YEAR ENTERING: _____
 OTHER: _____ TYPE OF CLASSES: Day Evening

High School Attended _____ City and State _____
Date You Graduated or Expect to Graduate _____

If you are not a high school graduate, do you hold a GED Certificate? Yes No
If so, GED Certificate issued by _____ Date of GED Certificate _____

Have you had education beyond high school? Yes No
If so, list all colleges and vocational schools previously attended

COLLEGE NAME	ADDRESS	CITY/STATE	DATES OF DEGREES (IF ANY)	ATTENDANCE

WILL YOU BE ATTENDING UNDER THE GI BILL? Yes No DO YOU WISH TO APPLY FOR FINANCIAL AID? Yes No

APPLICATION FEE \$50.00 I certify that all statements made in this application are complete and true. I understand that every student enrolling at South College agrees to abide by all policies and regulations of the College that may be found in the Student Handbook or in the College Catalog.

Applicant Signature _____ Date _____

Parent Signature (if applicant is under 18 years of age) _____ Date _____

Admissions Officer _____ Date _____

*INFORMATION NEEDED FOR STATISTICAL REPORTING TO THE DEPT. OF EDUCATION

